



IFW

Docket No. 69650/RSM

In re application of: Jai-Moo YOO et al.

Serial No.: 10/608,678

Examiner: E. Wong

Filed: June 27, 2003

Art Unit: 1753

For: METHOD OF MANUFACTURING BIAXIALLY TEXTURED METALLIC LAYER FEATURED BY ELECTROPLATING ON THE SURFACE OF SINGLE-CRYSTALLINE OR QUASI-SINGLE-CRYSTALLINE METAL SURFACE, AND ARTICLES THEREFROM

July 20, 2006

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

S I R:

Transmitted herewith is an amendment to the above-identified application.

_____ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established.

_____ a verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

_____ sheet(s) of _____ informal _____ formal drawings.

XXX No additional fee is required.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	NUMBER OF EXTRA CLAIMS PRESENTED	RATE FEE			
				SMALL ENTITY	OTHER ENTITY	SMALL ENTITY	OTHER ENTITY
Total Claims	7	* 20	*** 0	\$25	\$50	\$ 0	\$
Independ- ent Claims	1	** 3	*** 0	\$100	\$200	\$ 0	\$
Multiple Dependent Claims Presented _____ Yes <u>XXX</u> No				\$180	\$360	\$ 0	\$
For First Time:				TOTAL ADDITIONAL FEE		\$ 0	\$

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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"The HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims as originally filed.

_____ Please charge Deposit Account No. _____ in the amount of \$_____.

_____ A check in the amount of \$_____ is enclosed.

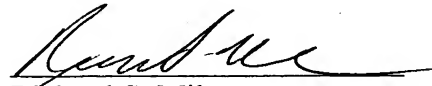
XXX The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125. Two copies of this sheet are enclosed.

XXX Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.

XXX Any patent application processing fees under 37 C.F.R. §1.17.

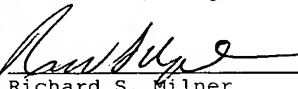
_____ Other: _____

Respectfully submitted,



Richard S. Milner
Registration No. 33,970
Attorney for Applicant
Cooper & Dunham LLP
1185 Avenue of the Americas
New York, New York 10036
(212) 278-0400

I hereby certify that this paper is being deposited this date with the U.S. Postal Service as first class mail addressed to:
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